



CITY OF CORAL GABLES SPECIAL EVENTS APPLICATION & PERMIT

Permit #: _____

Applicant Information	Legal Name of the Permit Applicant (Company or Individual): BID of Coral Gables in partnership with City of Coral Gables		Today's Date: 8/3/17	
	Contact Person for this Permit Application: Tatiana Amador			
	Contact Person Phone: 305 5690311	Contact Person Fax: 305 5690362	Contact Person Email: tamador@shopcoralgables.com	
	Permit Applicant Address: 220 Miracle Mile, #234	City: Coral Gables	State: FL	Zip: 33134
	Permit Applicant Phone:	Permit Applicant Fax:	Permit Applicant Email:	
Event Information	Is the Contact Person an Officer of the Legal Entity? <input type="checkbox"/> YES* <input type="checkbox"/> NO**			
	*If YES, attach verification from Sunbiz.org. **If NO, go to next question			
	Is the Contact Person an Authorized Agent of Applicant? <input checked="" type="checkbox"/> YES* <input type="checkbox"/> NO			
	*If YES, Contact Person (Authorized Agent) must provide the City with a Limited Power of Attorney evidencing that they are authorized to execute legally binding contracts on behalf of the permit applicant.			
	Name of Event: Giraldia Plaza Celebration		Event Date(s): 9/15/17	
	Hours of Event: 6:00pm - midnight	Set-up Time: 3:00pm	Take Down Time: 2:00 AM	
	Location of Event: Giraldia Plaza (100-Block of Giraldia)		Is Location Reserved? YES	
	A list of all staff, monitors, and volunteers assisting in this event and must be provided with this application including a sample of the badge or unique name tag that will be used at the event identifying your staff, monitors and volunteers from the participants and/or general public. BID staff: Tatiana Amador, Sarah Arayan Event firm: Pola Bunster, Isabella Acker City of Coral Gables: Belkys Perez			
	Anticipated Attendance: 500 +-		Admission Fees: <input checked="" type="checkbox"/>	
	# of year's event has been in existence? 1		Previous Location(s)? 1	
Event Description: (Provide an attachment if additional space is needed.) Celebrating the completion of Giraldia Plaza co sponsored by City of Coral Gables. We will commence with a ribbon cutting ceremony followed by live music performers all while the restaurant along Giraldia Plaza activate with their outdoor dining furniture.				

Event Information (Continued from page 1)	List all vehicles associated with this event: (if applicable) (Provide an attachment if additional space is needed.)
	How will rules, regulations, terms and conditions of the event be communicated to the participants? (Provide an attachment if additional space is needed.)
	Will there be any live music or recorded music at this event? What type of music will be played? (Provide an attachment if additional space is needed.) Yes, live music (2-3 bands)
	Number, type and location of all loud speakers and amplifying devices. (This information can be provided on a map as an attachment to this application.) Stage with AV

Vendor Information	Number of Food Vendors BID Restaurants	Vendors list provided to the City <input type="checkbox"/> Yes <input type="checkbox"/> No
	Food vendors have all permits/licenses.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Number of Other Vendors	Vendor list provided to the City <input type="checkbox"/> Yes <input type="checkbox"/> No
	Will there be alcohol at this event?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, has liquor license been issued?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Is this a charitable event?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If yes, what is the name of the charity/organization?	
	Have you completed the City application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you completed the State application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you checked yes to any of the questions above, you must contact the City of Coral Gables Licensing, Tax, & Utility Service office at (305) 460-5607.		

◆ THIS COVER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS ◆

Special Events Permit	<p>Legal Name of Permit Applicant (Individual or Company): Business Improvement District of Coral Gables</p> <p>Insurance is being submitted for an ongoing Special Event (circle one): YES or NO</p> <p>Insurance is being submitted for one Special Event permit (circle one): YES or NO</p> <p>Will liquor be served at the Special Event (circle one): YES or NO</p>						
Cover Sheet	<p>Without limiting PERMIT APPLICANT'S indemnification of the CITY, and during the term of this Agreement, PERMIT APPLICANT shall provide and maintain at its own expense the below described programs of insurance. Such programs and evidence of insurance shall be satisfactory to the CITY and shall be primary to and not contributing with any other insurance or self-insurance program maintained by the CITY. Certificates or other evidence of coverage shall be delivered via email, fax or US mail to:</p>						
For	<p>Certificate Holder should read: City of Coral Gables Insurance Compliance P.O. Box 100085 - CE Duluth, GA 30096</p> <p>Email address: cityofcoralgables@ebix.com</p>						
Evidencing Insurance to the City of Coral Gables	<p>Such certificates or other evidence of coverage shall be delivered prior to commencing performance under this Permit, and shall contain the express condition that the CITY is to be given written notice of at least thirty (30) days in advance of any cancellation, non-renewal or material change of any insurance policy.</p>						
Insurance Requirements	<p>Companies are required to evidence the following Insurance to the City;</p> <table border="1"> <thead> <tr> <th>Insurance Coverage Type</th> <th>Limit of Liability Required</th> </tr> </thead> <tbody> <tr> <td>Commercial General Liability</td> <td>Each Occurrence \$1,000,000 Aggregate \$2,000,000</td> </tr> <tr> <td>Liquor Liability (required if liquor is served)</td> <td>Each Occurrence \$1,000,000 Aggregate \$2,000,000</td> </tr> </tbody> </table>	Insurance Coverage Type	Limit of Liability Required	Commercial General Liability	Each Occurrence \$1,000,000 Aggregate \$2,000,000	Liquor Liability (required if liquor is served)	Each Occurrence \$1,000,000 Aggregate \$2,000,000
Insurance Coverage Type	Limit of Liability Required						
Commercial General Liability	Each Occurrence \$1,000,000 Aggregate \$2,000,000						
Liquor Liability (required if liquor is served)	Each Occurrence \$1,000,000 Aggregate \$2,000,000						
For	<ul style="list-style-type: none"> All insurance policies evidenced to the City shall name the City of Coral Gables as an Additional Insured on a Primary and Non-contributory basis. All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement in favor of the City of Coral Gables. All insurance companies providing coverage must have an A.M. Best rating of at least (A-/VI) or an equivalent rating given by a recognized rating agency. 						
Companies	<p>Companies evidencing insurance must provide the following documents to the City;</p> <ol style="list-style-type: none"> This Cover Sheet with all of the questions above answered. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured on a primary and non-contributory basis including a Waiver of Subrogation in favor of the City. A copy of the Endorsements evidencing that Additional Insured status has been provided to the City and that this coverage has been provided on a Primary & Non-Contributory Basis. A copy of the all Waiver of Subrogation Endorsements for each line of coverage required. 						
Insurance Requirements	<p>Individuals are required to evidence the following Insurance to the City;</p> <table border="1"> <thead> <tr> <th>Insurance Coverage Type</th> <th>Limit of Liability Required</th> </tr> </thead> <tbody> <tr> <td>Personal Liability Insurance</td> <td>Each Occurrence \$300,000</td> </tr> </tbody> </table> <p>(including host liquor liability coverage is if liquor is served)</p>	Insurance Coverage Type	Limit of Liability Required	Personal Liability Insurance	Each Occurrence \$300,000		
Insurance Coverage Type	Limit of Liability Required						
Personal Liability Insurance	Each Occurrence \$300,000						
For	<p>Individuals evidencing insurance must provide the following documents to the City;</p>						
Individuals	<ol style="list-style-type: none"> This Cover Sheet with all of the questions above answered. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured. 						
If Applicant Does Not Have Insurance	<p>Alternatively, Companies & Individuals may obtain liability insurance through a TULIP (Tenant User Liability Insurance Program) established by the City @ www.ebi-ins.com/tulip.</p> <p>The City of Coral Gables reserves the right to require additional types of insurance coverage or higher limits of liability for any event. This determination will be made by the Risk Management Division.</p>						
<p align="center">City of Coral Gables Insurance Compliance Contact Information Phone: (951) 652-2883 • Fax: (770) 325-0417 • Email: cityofcoralgables@ebix.com</p>							

-Potencial
4/3

City Services	Police	# of Officers 2	Date(s) Required 9/15/17	Hours Needed (i.e. 8 a.m. - 5 p.m.) 6:00pm - midnight
	The final number of Coral Gables Regular-Off-Duty Police Officers required for an event will be determined by the Coral Gables Police Department upon the approval of all required permits for this event. Please contact the Coral Gables Police Department to obtain an Off-Regular-Duty Police Services Permit Application and Fee Schedule by calling (305) 460-5427.			
	Clearance Form received: <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Fire/Medical NOX'S BOX/Baker	<input type="checkbox"/> On Call <input checked="" type="checkbox"/> On Site Potencial Contact the Coral Gables Fire Department Administration Division for questions or costs associated with onsite coverage at (305) 442-1600.		
	Clearance Form received: <input type="checkbox"/> Yes <input type="checkbox"/> No			
	City Facilities	Location	If using a park, do you need the restrooms opened? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Electrical Requirements Gen. 2 exten stage/band	Please list all electrical requirements including the type of electricity (i.e. 110V), amperage needed, the number of outlets and the type of equipment needing the electricity (i.e. sound system, popcorn machine, etc.):		
	Dates needed		Hours per day needed	
	Trash	Who will be responsible for trash pick-up during the event? SFM	Hours per day needed	
	City Equipment	<input type="checkbox"/> Barricades NA Contact PW -Barricades Div to reserve equipment at (305) 460 51 3		
Signs/Banners	Please list any requests for use of City signs and/or location of signs: large entrance ; Afternoon social ;			
Other (band - SPANIS)	Please list any other requests for City services (be specific):			
All booths, stands, signs/banners must be removed immediately following the event. For additional information call Code Enforcement at (305) 460-5266.				

Additional Event Features (Applicants must check all that apply)	<input type="checkbox"/> Temporary Fencing NO	<input type="checkbox"/> Inflatable	<input type="checkbox"/> Music (Recorded)
	<input checked="" type="checkbox"/> Signs/Banners (SA Area)	<input type="checkbox"/> Open Flames	<input checked="" type="checkbox"/> Music (Live) ; code enf.
	<input type="checkbox"/> Port-A-Johns NO	<input type="checkbox"/> Fireworks	<input checked="" type="checkbox"/> Amplifying Devices Or Loud Speakers
	<input type="checkbox"/> Tents or Canopies	<input type="checkbox"/> Carnival Amusement Rides	
	<input type="checkbox"/> Barricades NO	<input checked="" type="checkbox"/> Electrical Services Generators	
Company Name: _____			
Contact: _____ Phone Number: _____			
If any of the following apply, a separate narrative description of each additional feature shall be provided to the City with this application.			

• BAE add. back
lock
lot 25 / stay closing & parking

Closure of Streets Or City Right-of-Way	City Streets	Does this event propose closure or use of any street(s)? <input checked="" type="checkbox"/> Yes <i>already closed</i> <input type="checkbox"/> No			
		If yes, please fill in information below:			
	Street Name <i>Everada Plaza</i>		From/To	Date(s)	Time(s)
	City Sidewalks	Does this event propose closure or use of any sidewalks? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
		If yes, please fill in information below:			
	Sidewalk Location		From/To	Date(s)	Time(s)
	City Alleys	Does this event propose closure or use of any alleys? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
		If yes, please fill in information below:			
	Alley Location		From/To	Date(s)	Time(s)
	Public Parking Lot <i>Kevin</i>	Does this event propose closure or use of any parking lot? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
		If yes, please fill in information below:			
	Parking Lot Location <i>Lot 25</i>		From/To	Date(s)	Time(s)
City Right-Of-Way	Does this event propose closure or use of any City right-of-way? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	If yes, please fill in information below:				
Right-of-way location		From/To	Date(s)	Time(s)	
Parade Route	Does this event propose closure or use of any street(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	If yes, please fill in information below:				
Parade Route		From/To	Date(s)	Time(s)	
If you checked yes to any of the above, a site plan showing all of the above requests must be provided and a street closure permit may be needed. Please call (305)460-5607 for more information.					

Schedule of Fees, Performance Bonds and Exceptions

- A. The schedule of fees, bonds and exemptions for special events shall be as follows:

SPECIAL EVENT FEE STRUCTURE				
Event Type	Base Fee (Does not include Additional fees as described further below)			
	1 day	2 day	3 day	4 days
NON-PROFIT/GOVERNMENT ORGANIZED EVENT				
Event of up to 500 persons/day	\$300	\$450	\$550	\$700
Event between 500 - 1,000 persons/day	\$400	\$700	\$950	\$1150
Event of more than 1,000 persons/day	\$500	\$900	\$1,200	\$1,500
FOR-PROFIT EVENT				
Event of up to 500 persons/day	\$600	\$1,000	\$1,300	\$1,500
Event between 500 - 1,000 persons/day	\$800	\$1,400	\$1,800	\$2,100
Event of more than 1,000 persons/day	\$1,000	\$1,800	\$2,400	\$2,800

* All applications must be received 30 days in advance of date or a 25% additional fee will be applied.

- B. The City may waive one or more of the enumerated charges for nonprofit organizations based upon experience with previous events, size, duration, location, nature of the event and the likelihood of un-removed litter or damage to property. In the event that the nonprofit organization demonstrates that it has contracted for clean-up activities with a city-approved group, the performance bond shall be waived.
- C. Neighborhood or block parties shall be exempt from the provisions of this article so long as no commercial activity is conducted, no admission fee is charged, and members of the general public are not allowed access. Provided, however, that individuals or organizations should notify the City Manager's Office when a neighborhood party is planned so that police, fire, and other emergency service organizations will be aware of the time, place, and scope of the event.
- D. The closing fee set forth in this article shall be construed as being in addition to other fees or charges imposed for labor, materials, police or fire protection services, or any other charges for City services incidental to the assembly or street closing and other fees shall still be levied and collected in addition to the closing fee herein provided.
- E. Political or public issue events shall be exempt from the provisions of this Section. Individuals or organizations planning such an event shall notify the City Manager's Office when a political or public issue event is planned so that police, fire, and other emergency service organizations will be aware of the time, place, and scope of the event and the name or names of persons in charge.
- F. Funeral processions shall be exempt from the terms of this article.
- G. ADA Notice: The City welcomes individuals with disabilities. To request a modification to a policy, practice or procedure or to request an auxiliary aide or service (such as a sign language interpreter) in order to participate in a City program, activity or event, please contact the City's ADA Coordinator Dona Spain or the Director of the sponsoring department at least three (3) business days in advance. ADA Coordinator Dona Spain may be reached by email dspain@coralgables.com, or by telephone: 305-460-5095 (voice) or 305-460-5010 (TTY/TDD).
- H. All Expanded Polystyrene (Styrofoam) containers is prohibited. Special events permittees and their subcontractors are prohibited from selling, using or providing food/drinks in, or offering the use of, expanded polystyrene articles. Upon warning, the permittee or subcontractor must discontinue use. Failure to do so within a reasonable amount of time may lead to the discontinuation of the service, sale or participation in the event. Violations may also lead to the imposition of fines, the revocation of the permit, the placement of conditions on future special events permits or the denial of future special events permits. (Sec. 62-230, City of Coral Gables Code) <http://coralgables.com/index.aspx?page=1203>
- I. Applicant must comply with such other requirements the City may deem necessary in order to provide for traffic control, street and property maintenance, and the protection of the public health, safety and welfare.

Event Fee \$ waived

Performance Bond \$ waived

* Fees are set by the Parks and Recreation Director. The Performance Bond must be issued by a separate check and all checks must be made payable to the City of Coral Gables.

Additional Conditions or changes to application:

Event Name: _____ **Event Date** _____

Indemnification:

For and in consideration of the City of Coral Gables consent to allow the Applicant to hold a Special Event, Parade or Public Assembly (as defined by City Ordinance) within the limits of the City of Coral Gables, the Applicant agrees as follows:

The Permit Applicant jointly and severally, hereby hold harmless, indemnify and defend the City of Coral Gables, its representatives, officers, agents, affiliates, employees, the administration and elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts or omissions on the part of the Permit Applicant or any of the participants of the Event outlined in this application. This indemnification provision shall survive the termination of this contract and shall be in full force and effect beyond the term or termination of this contract, however, terminated. This indemnification provision includes claims made by the entitlement, if any, to immunity under section 40.11, Florida Statutes. Nothing contained herein shall be construed as a waiver of any immunity or limitation of liability the City may have under the doctrine of sovereign immunity of section §768.28, Florida Statutes.

Signature of Authorized Agent or Applicant

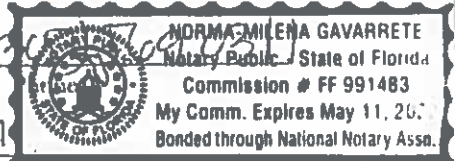
Date

Print Name

Title

Address City/State/Zip Code

Subscribed and sworn to before me, this 3rd day of August 2017



Approval Signatures Required

Fred Couceyro
Parks and Recreation DirectorBrian Lawrence
Police MajorGilbert Hernandez
Fire Division ChiefWilliam Ortiz
Code Enforcement Director

Application, performance bond(s), comprehensive site plans, event publications, flyers, and insurance must accompany this application and must be submitted to:

Special Projects Coordinator
Parks and Recreation Division/Special Events
405 University Drive, Coral Gables, FL 33134
Phone: (305) 460-5607 • Fax: (305) 460-5639
E-mail: ngavarrete@coralgables.com

Expanded Polystyrene or Styrofoam Clause:

Special events permittees and their subcontractors are prohibited from selling, using or providing food/drinks in, or offering the use of, expanded polystyrene articles. Upon warning, the permittee or subcontractor must discontinue use. Failure to do so within a reasonable amount of time may lead to the discontinuation of the service, sale or participation in the event. Violations may also lead to the imposition of fines, the revocation of the permit, the placement of conditions on future special events permits or the denial of future special events permits. (Sec. 62-230, City of Coral Gables Code)

Meeting Date & Time: _____

Year: _____

Site Map

City of Coral Gables
Special Event Checklist of Requirements

→ Police - 3 officers

Event Title: Givaleh Plaza Celebration

10 ft walk

Event Description: _____

15 ft rest

Event Sponsor: _____

(10 ft) center

Contact Person: _____ Phone #: _____

15 ft rest

Estimated Size of Event _____ Is there a rain date alternative? _____

10 ft walk

- _____ Special Event License Application form.
- _____ Special Event Fee. Amount: _____ & Date: _____
- _____ Performance Bond: Amount: _____ & Date: _____
- _____ Liability Insurance Coverage Submitted: _____
- _____ Electrical Permit: _____
- _____ Copy of Marketing/Advertising materials utilized for event. _____
- _____ What are setup/breakdown times? _____
- _____ Resident Notification: Copy of Letter & Date Sent: _____ & Mailing Labels: _____
- _____ Notification to Adjacent Property Owner(s) of Anticipated Noise _____
- _____ Alcohol License Permit: Permit # _____ & Date Issued: _____
- _____ Site Plan Route Map/Road Close: _____
- _____ Map of Event area/location and set-up. _____ MOT: _____
- _____ Are City services required? (In-kind or with fee) If so, which departments will be involved and how? Permit # _____ & Date Issued: _____ & Dept.: _____
- _____ Parks Permit or Evidence of Permission to Use Premises: Yes: _____ No: _____
- _____ Are portable toilets requested-if so is Waste Management involved? _____
- _____ Water Stations and Locations: _____ Plan of action: _____
- _____ Sanitation and Recycling Plan: _____
- _____ Pertinent vendor licensing permit: Permit # _____ & Date Issued: _____
- _____ Food Permit: Permit # _____ & Date Issued: _____
- _____ Police required-how many officers needed? Permit # _____ & Date Issued: _____
- _____ Security Plan/Medical Plan: Action Plan: _____
- _____ Fire department to be present? Permit # _____ & Date Issued: _____
- _____ Barricades needed? _____ Is city providing? Permit # _____ & Date Issued: _____
- _____ Fire watch - outside cooking? Permit # _____ & Date Issued: _____
- _____ Closing of streets needed for event? Street Name: _____
- _____ Handicapped parking required? Yes: _____ No: _____
- _____ Parking Permit# _____ and Transportation Plan: _____
- _____ Summary of Event _____

Banners: day of
Frames?

EVENT DATE: _____

Cook enforcement 1/2 price & 1/2 price -OT

Approved: Yes: _____ No: _____ & Reason: _____

Date: _____